	CH. 13 PLAN - D	Date: 5/13/09			9					
	(MIDDLE DISTRICT - I	Lastnam	Lastname-SS#: Okafo		-1820					
	RETAIN COLLATERAL & PA	SURRENDER COLLATERAL								
Retain	Creditor Name	Sch D#	Description of C	ollateral	Credit	Creditor Name			Description of Collateral	
Rei										
	ARREARAGE CLAIMS				REJEC	TED EX	ECUTORY	CONTRACT	S/LEASES	
	Creditor Name	Sch D#	Arrearage Amount	(See †)	Credit	Creditor Name		Description of Collateral		
			Milouit	**						
Retain				**						
				**						
				**						
				**						
				**						
				**						
				**						
	LTD - DOT ON PRINCIPAL RESID	ENCE &	OTHER LONG T	ERMIDER	TS					
	Creditor Name	Sch D#	Monthly	Int. Rate	Adequate	Mi	nimum	Descript	ion of Collateral	
	Creditor Ivanie	SCII D#	Contract Amount		Protection	Equal	Payment	Descript	ion of Conateral	
Retain				N/A N/A	n/a n/a					
Re				N/A	n/a					
				N/A	n/a					
	STD - SECURED DEBTS @ FMV									
			70 er		Adequate	Mi	nimum			
	Creditor Name	Sch D#	FMV	Int. Rate	Protection		Payment	Descript	ion of Collateral	
Retain				7.00						
Re				7.00						
				7.00						
S'	TD - SECURED DEBTS @ 100%									
J			Payoff	* . D .	Adequate	Minimum		Description of Colletons		
	Creditor Name	Sch D#	Amount	Int. Rate	Protection	4	Payment	Description of Collateral		
nin	CACV of CO, LLC	1	\$17,766	7.00	\$178	\$1,	134.30	House and Land		
Retain				7.00					-	
				7.00						
				7.00						
ATT	ORNEY FEE (Unpaid part)		Amount		DD ODOCED-C	TTA-D	DED 12	DI AND	WW.	
Lav	w Offices of John T. Orcutt, P.C.		\$2,500		PROPOSED C	πΑР	TER 13	PLAN P	ATMIENT	
SECURED TAXES Secured Amt					<b>M4.40.4</b>					
IRS	3 Tax Liens			\$	\$1,194	per n	nonth for	60	months, then	
Real Property Taxes on Retained Realty \$1,232			\$1,232							
UNSECURED PRIORITY DEBTS Amount			\$	N/A	ner n	nonth for	N/A	months.		
		\$179	Ψ	14/18	per ii		17/14	-11/11/11/11		
State Taxes \$920				Adequate Protection	on Payme	ent Period	2.70	months.		
Personal Property Taxes \$35		\$35	C 1 =	Adequate Protection Payment Period						
Alimony or Child Support Arrearage  CO. SIGN PROTECT (Pay 100%)  Day of Amt				Sch D # = The number of the secued debt as listed on Schedule D.						
CO-SIGN PROTECT (Pay 100%) Int.% Payoff Amt All Co-Sign Protect Debts (See*)					Adequate Protection = Monthly 'Adequate Protection' payment amt.					
GENERAL NON-PRIORITY UNSECURED Amount**				† = May include up to 2 post-petition payments.  * Co-sign protect on all debts so designated on the filed schedules.						
DMI=				** = Greater of DMI x ACP or EAE			(Page 4 of 4)			
				lan_MD_(New_DeSar						
Other Miscellaneous Provisions										
Plan to allow for 3 "waivers".										
		Cas	e 09-8068	31 E	oc 12 Fil	ed 0	5/22/0	) <del>9 Pa</del>	ge 1 of 1	